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Navy and Marine Corps Medical News (MEDNEWS)  
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This service is for general distribution of information and news to Sailors and Marines and their families, civilian employees, and retired members of the Navy and Marine Corps and their families. Further dissemination of this information is encouraged.

Stories for this week include:

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#### Liberia-Bound Medical Team Serves Marines

Mamba, Liberia--The sign out front reads "Mamba General Hospital," but in reality it's a field hospital transformed from two rooms provided by the embassy in Liberia. It's run by a 12-person staff from Naval Medical Center (NMC) Portsmouth, VA, who make up the Mobile Medical Augmentation Readiness Team (MMART). The surgeon, anesthesiologist, two nurses, seven corpsman and medical regulator who make up the team all had one weeks' notice for their deployment in support of Special Purpose Marine Air Ground Task Force-Liberia.

"That's not so bad, we only had two days' notice before going to Bosnia last December," said CDR Martin L. Snyder, MC, who is in charge of the team.

This deployment isn't like other deployments they'd been on. For various reasons, including their desire to be near the Marines whose lives they are responsible for, the surgical team is deployed ashore. The MMART established a field hospital, the equivalent to an Army MASH unit, with the capability of handling almost any trauma.

"We don't have the luxury of a large decked ship (which usually has surgical equipment and spaces onboard) or a

local medical facility. Since the Marines are at risk of taking fire we brought our capabilities to them," said Snyder. "We've cut out the middleman and brought the surgical capabilities to the front line."

The team was put to the test recently when they performed an emergency appendectomy. The operation was, as anticipated, a success.

"Business has been slow and we like it that way," said LCDR Richard Bosco, MC, the team's anesthesiologist.

But while the team hasn't had a lot of "business," their presence is appreciated by the Marines they are there to keep healthy. If it weren't for the team, injured or sick Marines would have to be evacuated to the nearest military medical facility.

"The shortest distance for any medevac, if we weren't here, would be 12 hours to London or Rota, Spain, and that's too long to assure survival," said Snyder.

By 1LT Robert Riggle, USMC, Joint Task Force-Assured Response

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#### DOD To Begin Charging For All Newborn Care

Starting 1 October 1996, parents will have to pay for newborn care at DOD hospitals from the time of birth whether or not they carry health insurance. DOD currently charges the standard family member rate for the mother and nothing for the baby, providing both are DOD-eligible beneficiaries and go home together. The same rate is charged for DOD-eligible babies requiring hospitalization after the mother is discharged. If the family has health insurance, DOD currently bills the insurer to recover full costs from the time of birth. Beginning 1 October, however, DOD also will bill parents without health insurance for all newborn care from the time of birth.

Medical treatment facilities will charge just \$9.90 a day for babies eligible for DOD health care, the same it charges new mothers. The charges will be significantly higher, however, for newborns not normally eligible for care -- newborns of dependent daughters, for example. They will be billed for all costs the treatment facility incurs in delivering the baby, officials said. For normal deliveries of healthy babies, the charges will total about \$600 to \$800. In fiscal year 1995, newborn care cost DOD \$140 million. The new policy will generate some additional revenue, but officials said the real reason for the policy change is to comply with legal requirements "to recover reasonable costs of providing care."

MGEN George K. Anderson, MC, USAF, deputy assistant secretary of defense for health services operation and readiness, said DOD is concerned about causing financial hardship for individuals, but he doesn't expect the new policy to typically do that.

"We have a legal obligation to charge for services we render at taxpayers' expense and particularly for those

services beyond the health care benefit," said Anderson.  
"Under today's budget constraints, we must pay very close attention to every health care dollar we spend, but we never have and never will turn away a patient who needs our help."  
By American Forces Press Service

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#### Vets Notified About Possible Chemical Exposure

Washington, DC--The Department of Defense (DOD) is expanding its program to notify veterans about their possible exposure to chemical weapons during the Gulf War. Some veterans may have been exposed to low levels of chemical weapon agents resulting from demolition of Iraqi ammunition at the Khamisiyah weapons storage complex in Southern Iraq in March 1991, shortly after Desert Storm had ended.

The expanded notices were ordered by Deputy Secretary of Defense John P. White on 18 September because information currently being evaluated suggests low level exposures may have taken place out to 25 km from the Khamisiyah complex on 10 March 1991, when a small group of U.S. forces detonated a still unknown number of 122 mm chemical rockets in a pit area a few kilometers away from Bunker 73, which was destroyed on 4 March. Both the pit and Bunker 73 are located in the vast Khamisiyah complex.

The Pentagon announced the discovery of the destruction of chemical weapons at Bunker 73 during a news conference on 21 June 1996. At that time, there had been no reports of demolition by U.S troops in the pit area.

The team's further discussions with veterans revealed that members of the 37th Engineer Battalion destroyed stacks of crated munitions in the pit area on 10 March 1991, after these stacks were found by the battalion operations officer a day earlier.

Information about the destruction of chemical weapons in the pit area has been developed since that time.

As reported to the Presidential Advisory Committee on Gulf War Veterans Illnesses on 5 September 1996, DOD and the Central Intelligence Agency are working on a computer model that will estimate the possible dispersion of any chemical agents that might have occurred during the weapons destruction. DOD will begin notifications by letter immediately to about 5,000 service members who were in the possible dispersion area.

Veterans who were in the Khamisiyah area in March 1991 who have not already enrolled in either the DOD or VA registry and examination program can call toll-free DOD at 1-800-796-9699 and VA at 1-800-749-8387.

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#### Bethesda Corpsman Pulls Driver From Burning Truck

Prince George's County, MD--Heroic actions on the part of HM2 Donald Burke, 28, may have saved the life of a truck accident victim recently.

Burke has been nominated for the Navy-Marine Corps Medal, the Department of the Navy's highest award for bravery during peacetime. Secretary of the Navy John Dalton is scheduled to present the award, Friday, 27 September 1996.

Burke and his family saw a truck on Interstate 95 suddenly swerve into the median, and then run into a tree. Burke stopped his car and rushed up to the cab of the truck, where the dazed driver told him he couldn't get out. Burke saw flames coming from the engine and smoke filling the cab, so he grabbed the injured driver by the arms and chest and pulled him out. An unidentified passerby helped the corpsman carry the driver away from the vehicle, which by this time was ablaze.

Realizing that if the truck exploded, the onlookers who had gathered might be injured, Burke then flagged down a tractor-trailer and borrowed a fire extinguisher, but was unable to put out the truck fire.

The leading petty officer of the health care operations office at National Naval Medical Center Bethesda, MD, Burke said he had emergency medical training almost eight years earlier, but little hands-on experience.

"But when it was time to use it...it all came back," he said.

Mark Brady, a spokesman for the Prince George's County Fire Department said that while passersby often stop to help accident victims, "it's rare to find someone with enough courage to put themselves at risk."

Burke said he's surprised by the attention he's getting because of his actions.

"I'd like to think (it was something) anyone would have done," he said.

The truck driver was taken by helicopter to the Maryland Shock Trauma Center where he was treated for head, chest and lower-body injuries.

By JO2 Roy DeCoster, NNMC Bethesda, MD

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#### Great Lakes DUI-Free Campaign Rewards Staffers

Naval Hospital (NH) Great Lakes, IL (NWSA)--Staying sober at the wheel brings its own reward, but now it can also bring 72 hours of special liberty for NH Great Lakes staff members.

The liberty is awarded if all hospital and branch clinic staffers have gone without any Driving Under the Influence (DUI) citations for 120 consecutive days. The first time period ended 9 September. The second began on 10 September.

"The idea is for people to be their shipmate's keeper," said CAPT William Holden, MC, NH Great Lake's commanding officer. "In 1995, there were six DUIs by our personnel, and in 1996, there were three before we started this program."

By Judy R. Lazarus, Great Lakes Bulletin Associate Editor

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#### Corpsman Walks Away With Gold

Naval Hospital (NH) Twentynine Palms, CA--HMCS Warrick Yeager of NH Twentynine Palms, CA, recently walked away with national championship titles in the five and 20 kilometer race walk events at the USA Track and Field National Masters Championships in Spokane, WA.

The championships attracted master's level athletes from around the world, including Canada, Australia and New Zealand. Both men and women compete in five year age groups beginning at age 30 to 95 and over.

Yeager's first gold, in the 5k (3.1 mile) race, came on the second day of competition. He blazed around the track in 22 minutes and 20 seconds, despite the fact he was still recovering from a pre-Olympic Trials injury.

His second gold came in the 20k (12.4 mile) race walk on the last day of competition. Though not his best time, the one hour, 38 minute, 54 second time put him a full seven minutes ahead of the closest competitor.

Yeager also captured a bronze in an event that he hasn't competed in since 1974, the 3000 meter steeplechase. He entered the event in a moment of whimsy when he woke from a short nap after winning the 5K race. Unable to make the race time by taking the shuttle bus from the hotel, he ran the four miles to the track, arriving just prior to the race start time.

Yeager wears a red, white and blue Navy tee shirt when ever he competes. He said it gets him a lot of attention.

"At the 1996 50K Olympic Trials, throughout the race people who didn't know my name were yelling, 'go Navy!'" said Yeager. This, despite the fact that he was in the process of upsetting the hometown favorite.

Yeager is in training and working on perfecting his technique with the goal of entering the race walking competition in the next Olympics.

By Dan Barber, NH Twentynine Palms, CA

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#### Operational and Aeromedical Course Scheduled

Pensacola, FL--"Aerospace Medicine: Yesterday, Today and Tomorrow" is the theme of the 10th annual Naval Operational and Aeromedical Problems Course sponsored by the Naval Aerospace and Operational Medical Institute (NAOMI) in Pensacola, FL.

The course will be held 9-13 December 1996 at Naval Air Station Pensacola's conference center.

Pre-registration begins after 1 October through NAOMI's academics department. It can be reached at (904) 452-2741, DSN 922-2741, or e-mail CODE323@OPMED1.med.navy.mil.

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#### Naval Reserve Nurse of the Year Sought

Unit Commanders, Naval Reserve Association (NRA)

chapter presidents, and senior officers are encouraged to submit nominations for this year's Beatrice M. Ratner Award.

The Ratner Award is presented annual to recognize an outstanding junior Naval Reserve Nurse Corps officer who has demonstrated excellence in clinical practice, education, leadership and management, administration or research. Nominees must be in a drilling status.

The award was established as a tribute to its namesake, a former Navy nurse.

Deadline for submissions is 13 January 1997. The winner will be selected by NRA's awards committee, which will convene in April 1997.

The winner will be honored at NRA's national conference, 17-20 September 1997, in St. Petersburg, FL. Hotel room and conference fees are provided to the winner by the NRA.

For information on how to nominate an individual, contact RADM A.E. Rieder, (Retired), NRA, (703) 548-5800.

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#### TRICARE Question and Answer

Question: How does TRICARE support our readiness mission?

Answer: TRICARE contributes to readiness in several ways:

--It provides medical services and medical support to members of the Armed Forces to enhance physical readiness in preparation for deployment.

--If military hospital providers are deployed, TRICARE network providers may be used to staff the hospitals and clinics until Reservists arrive to assure hospitals and clinics are available to beneficiaries, even if the military providers are not.

--Because beneficiaries and health care providers have expressed substantial interest in activities that prevent disease and promote health, a wellness program including preventive services, enhanced benefits and free exams have been incorporated into the TRICARE Program. Participation in Wellness and Health Promotion programs lead to a healthy life style and long term wellness.

--Additionally, deployed active duty members will have peace of mind knowing that their families' health care needs are being addressed.

If you would like to know more about this issue, contact your local TRICARE Service Center.

Do you have a question about TRICARE? The Bureau of Medicine and Surgery now has a dedicated e-mail address to send in your questions and get a respond via MEDNEWS. Because of space constraints, not all questions will be answered. The e-mail address is [tricare@bms200.med.navy.mil](mailto:tricare@bms200.med.navy.mil).

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Healthwatch: Tips to Speed Your Metabolism

Weight management is a balancing act between taking in calories and burning them up. New research suggests the way your body burns energy may be at least as important as how much you eat. Try these tips for keeping your body's idle speed high.

#### 1. Quit Starving Yourself

When you deprive yourself of food, your body reacts protectively against an ancient threat: famine. Your resting metabolic rate--the calories you burn just to keep your body going--drops to a lower level to conserve energy. Your body works harder to preserve the food it gets by storing it as fat. That's why people who regularly diet have higher percentages of body fat than non-dieters do. Instead of counting calories, focus on cutting back on the fat and sugar in your diet.

#### 2. Get Exercise

Exercise helps you lose weight in several ways. It raises your resting metabolic rate, thus offsetting the lowering effects of dieting and helping you burn more calories even when at rest. Strength training is especially important here, because it increases the amount of muscle you have. And your body burns more fat to meet the metabolic needs of all that high-energy muscle.

#### 3. Exercise Longer

After 30 minutes of intensity exercise--walking, blowing, gardening--your body begins to burn stored fat for energy. It also takes at least 30 minutes to burn more calories than your body can replace by eating.

#### 4. Exercise Large Muscle Groups

Choose high-energy exercise--such as walking, bicycling, cross country skiing, swimming, step aerobics--that gives your arms and legs a good workout.

#### 5. Vary Your Workout

Your body gets efficient at doing the same exercise day after day, and you burn fewer calories. Try alternating gym workouts with outside activities. Or change your routine every six weeks. You'll burn more energy--and you won't get as bored.

#### 6. Eat a Good Breakfast

People who skip breakfast burn 5 percent fewer calories than those who eat a healthy morning meal.

#### 7. Avoid Alcohol and Smoking

Both inhibit the burning of abdominal fat. That's why drinkers and smokers tend to be bigger around the waist than abstainers.

#### 8. Eat Less Fat

Your body is very efficient at turning the fat you eat into body fat. It takes a lot more energy to turn carbohydrates into fat. That's why cutting back to less than 30 percent of your calories from fat can help you reduce your body fat more than just cutting total calories.

#### 9. Eat Three Meals

Studies show that both frequent small snacks and one of two large meals tend to lower your resting metabolic rate.

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Feedback and comments are welcome. Story submissions are encouraged. Contact Jan Davis at e-mail address [nmc0jkd@bms200.med.navy.mil](mailto:nmc0jkd@bms200.med.navy.mil), telephone 202/762-3223 (DSN 762-3223), or fax 202/762-3224.